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PTO/SB/05 (08-03)

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UTILITY PATENT APPLICATION TRANSMITTAL

1842-0021 Attorney Docket No. Boyd et al. First Inventor

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Dynamic Spinal Stabilization System Express Mail Label No. | EV389959205US

See MPEP		ON ELEMENTS ning utility patent application contents.	ADDRI	ESS TO:	Commis P.O. Box	p Patent App sioner for Pa c 1450 ria VA 22313	tents	n	
(Submi 2. Applic See 3 3. Specif (prefer - Desc - Cross - State - Refer or a c - Back	it an original and a cant claims small 7 CFR 1.27. fication red arrangement se criptive title of the in s Reference to Rela	[Total Pages 38] If forth below) vention ited Applications d sponsored R & D isting, a table, sting appendix tion		Specific	ogram (App Amino Acid ecessary) er Readabl cation Sequ	endix)	e Subi RF) g on:	mission	17548 U.S. PTO 10/749640
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4. Drawin 5. Oath or Dec a. Ne b. Co (fo) i. Appl 18. If a CONTI specification fo Contin Prior application i For CONTINUAT 5b, is considered	ng(s) (35 U.S.C. claration why executed (or py from a prior a r continuation/div DELETION OF Signed statement a name in the prior a 1.63(d)(2) and 1.3: lication Data She investigation with the prior a 1.63(d)(2) and 1.3: lication Data She investigation in the prior a 1.63(d)(2) and 1.3: lication Data She investigation in the title, or investigation in the distribution information:	[Total Sheets	37 CFR 1.76 uation-in-part (he prior apple on or division	or its equiva Other: Chec Rentu uisite informati (CIP) of Art (ication, from whilat application a	3(b) Statem a is an assignslation Do Disclosure Disclos	nent gnee) cument (if a 1449 nt rd (MPEP 5 itemized) ty Documer imed) st under 35 nust attach nount of \$80 d	PA Applic C C C C C C C C C C C C C C C C C C C	cower of attorney able) opies of IDS citations C. 122 PTO/SB/35	•
		19. CORRESPO	NDENCE A	DDRESS					
·	ner Number:	28078		OR	Corre	espondenc	e add	ress below	
Name	Michael D. Becl								
Address	Maginot, Moore		2000		•				
City	Indianapolis	er/Tower, 111 Monument Circle, Suite	State IN			Zip C	ode	46204	
Country	US		1 1119	317-638-2922		Fax		317-638-2139	
Name (Print/Type) Michael D. Beck Registration No. (Attorney/Agent) 32,722									
Signature	ne	How D. Gonto		- 4	, 3,	Date	Dece	ember 31, 200)3

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patentris, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 807.00

espond to a collection of info	ormation unless it displays a valid OMB control number.
Co	omplete if Kn wn
Application Number	To be assigned
Filing Date	December 31, 2003
First Named Inventor	Boyd et al.
Examiner Name	To be assigned
Art Unit	To be assigned
Attorney Docket No.	1842-0021

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)				
Check Credit card Money Other None	3. ADDITIONAL FEES				
Deposit Account:	Large Entity Sma				
Deposit 12 0014	Fee Fee Fee Code (\$) Code	Fee Fee Description le (\$) Fee Paid			
Account Number	1051 130 2051	<u>1 00 1 010</u>			
Deposit Account	1052 50 2052				
Name	1053 130 1053	cover sheet 3 130 Non-English specification			
The Director is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments		2 2,520 For filing a request for ex parte reexamination			
Charge any additional fee(s) or any underpayment of fee(s)	1804 920* 180				
Charge fee(s) indicated below, except for the filing fee	4005 4 0 00 400	Examiner action			
to the above-identified deposit account.	1805 1,840* 1809	1,840* Requesting publication of SIR after Examiner action			
FEE CALCULATION	1251 110 225	51 55 Extension for reply within first month			
1. BASIC FILING FEE	1252 420 225	52 210 Extension for reply within second month			
Large Entity Small Entity	1253 950 225	53 475 Extension for reply within third month			
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254 1,480 225	54 740 Extension for reply within fourth month			
1001 770 2001 385 Utility filing fee 385.00	1255 2,010 225	55 1,005 Extension for reply within fifth month			
1002 340 2002 170 Design filing fee	1401 330 240	01 165 Notice of Appeal			
1003 530 2003 265 Plant filing fee	1402 330 240	02 165 Filing a brief in support of an appeal			
1004 770 2004 385 Reissue filing fee	1403 290 240	03 145 Request for oral hearing			
1005 160 2005 80 Provisional filing fee	1451 1,510 145	· · · · · · · · · · · · · · · · · · ·			
SUBTOTAL (1) (\$) 385.00	1452 110 245	52 55 Petition to revive - unavoidable			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453 1,330 245				
Fee from Extra Claims below Fee Paid	1501 1,330 250				
Total Claims 43 -20** = 23 x 9 = 207	1502 480 250 1503 640 250				
Independent 8 - 3** = 5 x 43 = 215	1460 130 146				
Multiple Dependent		807 50 Processing fee under 37 CFR 1.17(g)			
Large Entity Small Entity	1806 180 18	(4/			
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)	8021 40 80	Recording each patent assignment per			
1202 18 2202 9 Claims in excess of 20		property (times number of properties)			
1201 86 2201 43 Independent claims in excess of 3	1809 770 28	309 385 Filing a submission after final rejection (37 CFR 1.129(a))			
1203 290 2203 145 Multiple dependent claim, if not paid	1810 770 28	310 385 For each additional invention to be			
1204 86 2204 43 ** Reissue independent claims over original patent	1801 770 280	examined (37 CFR 1.129(b)) 11 385 Request for Continued Examination (RCE)			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900 180	,			
SUBTOTAL (2) (\$) 422.00	Other fee (specify)				
SUBTOTAL (2) ((\$) 422.00 **or number previously paid, if greater; For Reissues, see above	*Reduced by Basic	ic Filing Fee Paid SUBTOTAL (3) (\$) 0.00			

SUBMITTED BY (Complete (if applicable)) Registration No. Name (Print/Type) 32,722 Telephone 317-638-2922 Michael D. Beok Date December 31, 2003 Signature

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